

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       | MS       | 66621  | 1/24     |
| FORMALITY REVIEW          | MW       | 59     | 02-08-00 |
| RESPONSE FORMALITY REVIEW | DF       | 88518  | 2/29/00  |

### INDEX OF CLAIMS

Rejected N  
 Allowed I  
 (Through numeral) Canceled A  
 Restricted O  
 Non-elected  
 Interference  
 Appeal  
 Objected

| Claim | Date     | Claim | Date     | Claim | Date     |
|-------|----------|-------|----------|-------|----------|
| Final | Original | Final | Original | Final | Original |
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If more than 150 claims or 10 actions  
staple additional sheet here

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